

2009-2010 VERIFICATION WORKSHEET

Federal Student Aid Programs

University of Arkansas at Monticello • Financial Aid Office • P. O. Box 3470 Monticello, Arkansas 71656 • (870) 460-1050 • Fax: (870) 460-1450

Your application was selected for review in a process called "verification." In this process, we are required by federal law (34 CFR, Part 668) to compare the information from your application with the information provided on this form and with signed copies of your 2008 federal tax forms [and your spouse's if you are married, or parent(s)' if you are considered dependent for federal aid purposes]. If there are differences between your application and the documents you submitted, corrections will be made. **We cannot process your financial aid until verification has been completed, so please provide the required documents as soon as possible.**

WHAT YOU SHOULD DO:

1. Collect your [and if applicable, your spouse's or parent(s)'] **signed 2008** federal income tax forms and W2(s).
2. Complete this form and provide the required signatures [yours and your parent(s)', if applicable].
3. Contact the financial aid office if you have questions about completing this worksheet.
4. Bring or mail this completed form and tax forms to the UAM Financial Aid Office.
5. Complete this form in black or blue ink only. Do not use a pencil.
6. Please **DO NOT** make any further corrections to the FAFSA once you have submitted this form.

NOTE: This form will be returned to you if information is not fully and accurately completed.

A. STUDENT INFORMATION:

<i>Last Name</i>	<i>First Name</i>	<i>M.I.</i>	<i>SSN</i>	<i>UAM ID #</i>
<i>Street Address</i>			<i>Date of Birth</i>	
<i>City</i>	<i>State</i>	<i>Zip Code</i>	() ()	<i>Cell Phone #</i>
			<i>Home Phone #</i>	

B. FAMILY INFORMATION:

An **Independent student (for federal student aid purposes)** will be able to state at least one of the following to be true. Proof may be requested.

- You were born before January 1, 1986.
- You are admitted to a masters or doctoral degree granting program.
- You were married, as of the day you filed the Free Application for Federal Student Aid.
- You have children for whom you will provide more than half of their support from July 1, 2009 through June 30, 2010.
- You have dependents (other than your children or spouse) who live with you and you provided more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.
- If at any time since you turned age 13, both your parents were deceased, you were in foster care or you were a dependent or ward of the court.
- You are currently serving on active duty in the U.S. Armed Forces for purposes other than training or you are a veteran of the U.S. Armed Forces.
- You are or were an emancipated minor or in legal guardianship as determined by a court in your state of legal residence.
- On the FAFSA you answered "Yes" to one of the questions regarding homelessness, and met the federal definitions of such on or after 7/1/2008.

✓ **Check a box** based on the definition of an independent student as defined above and complete the grid below.

DEPENDENT STUDENT:

List the people in your parent(s)' household. Include:

- Yourself
- Your custodial parent(s) (include step-parent)
- Your custodial parent(s)' dependent children
- Other people only if they now live with your parents, and your parents provided more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

INDEPENDENT STUDENT:

List the people in your household. Include:

- Yourself
- Your spouse, if married
- Your dependent children, if you will provide more than half of their support from July 1, 2009 through June 30, 2010.
- Other people only if they now live with you, and you provided more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

FULL NAME	AGE	RELATIONSHIP	COLLEGE
		Self	University of Arkansas at Monticello

If more space is required, attach a separate sheet.

- CONTINUED ON NEXT PAGE -

C. TAX FORMS and INCOME INFORMATION:

SECTION 1. If you did not keep a copy of your tax return, call the IRS at 1(800) 829-1040 and request a transcript of your tax forms.

Student: (Check one box only) <input type="checkbox"/> Check and attach signed tax return and W2(s). <input type="checkbox"/> Check if you will not file and are not required to file a 2008 U.S. Income Tax Return. <i>Complete Section 2 after finishing Section 1.</i>	
<p style="text-align: center;">FOR DEPENDENT STUDENTS</p> Parent(s): (Check one box only) <input type="checkbox"/> Check and attach signed tax return and W2(s). <input type="checkbox"/> Check if you will not file and are not required to file a 2008 U.S. Income Tax Return. <u>Complete Section 2</u>	<p style="text-align: center;">FOR INDEPENDENT STUDENTS</p> Spouse: (if married) (Check one box only) <input type="checkbox"/> Check and attach signed tax return and W2(s). <input type="checkbox"/> Check if you will not file and are not required to file a 2008 U.S. Income Tax Return. <u>Complete Section 2</u>

SECTION 2. List all employers and any income received in 2008 **for all family members who indicated in SECTION 1 that they did not file and are not required to file a 2008 Federal income tax return.** *If you have no income to report enter NONE under Source of Income.*

2008 Source of Income	Is income listed for student, spouse, or parent(s)? (List One)	2008 Income Amount
		\$
		\$
		\$

D. ADDITIONAL FINANCIAL INFORMATION (income exclusions) and UNTAXED INCOME From 2008:
 Both tax filers and non-tax filers must list any untaxed income received in 2008 (ENTER ANNUAL AMOUNT). **Enter zeros if no funds were received.**
 Information requested below is from either Worksheet A, B, or C of the Free Application for Federal Student Aid (FAFSA), as noted in brackets.

STUDENT/SPOUSE	2008 Additional Financial Information	PARENT(S)
\$	Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040—line 50 or 1040A—line 31.	\$
\$	Child support paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your (or your parents') household, as reported on the front of this form.	\$
\$	Taxable earnings from need-based employment programs such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$
\$	Grant and scholarship aid <u>reported to the IRS as part of your (or your parents') Adjusted Gross Income</u> . Includes AmeriCorps benefits (awards, living allowances, and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships.	\$
\$	Combat pay or special combat pay. <u>Only enter the amount that was taxable and included in the adjusted gross income</u> . Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q).	
STUDENT/SPOUSE	2008 Untaxed Income	PARENT(S)
\$	Payments to tax-deferred pensions and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Forms in Boxes 12a through 12d, codes D, E, F, G, H, and S.	\$
\$	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040—line 28 + line 32 or 1040A—line 17.	\$
\$	Child support received for all children. Don't include foster care or adoption payments.	\$
\$	Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b.	\$
\$	Untaxed portions of IRA distributions from IRS Form 1040—lines (15a minus 15b) or 1040A—lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	\$
\$	Untaxed portions of pensions from IRS form 1040—lines (16a minus 16b) or 1040A—lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	\$
\$	Housing, food, and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits).	\$
\$	Veterans' non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$
\$	Other untaxed income or benefits not reported, such as workers' compensation, disability, etc. Don't include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$
\$	Money received , or paid on your behalf (e.g. bills), not reported elsewhere on the FAFSA.	\$XXXXXX

E. SIGN THIS WORKSHEET:

By signing this worksheet, I (we) certify that all the information reported on this worksheet is complete and correct. If dependent, at least one parent must sign. **WARNING:** If you purposefully give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

STUDENT SIGNATURE	DATE	PARENT/STEP-PARENT SIGNATURE (Dependent Students Only)	DATE

The Financial Aid Office reserves the right to request additional documents if needed to confirm the data submitted on your FAFSA.

PLEASE MAKE SURE THE STUDENT'S NAME AND SOCIAL SECURITY NUMBER &/OR UAM ID NUMBER ARE ON ALL DOCUMENTS